

Clark County Regional Support Network Policy Statement

Po	olicy No. olicy Title: fective Date	30 Inpatient Data Requirements e: 09/01/2001
Policy: State reporting is required for all inpatient authorizations processed by the RSN. The RSN has developed the following data collection procedures in order to provide the needed reporting to Washington State Mental Health Division.		
Re	eference:	WAC 388-865, Washington State Mental Health Division/Clark County Contract.
Pr	ocedure:	
1)	At the tim	e of a request for an inpatient hospitalization, the Inpatient Data Form is completed. (see t).
2)	admission	will issue the State Inpatient Authorization number for each voluntary and involuntary within 24 hours of request for authorization. The admission information is then entered into a patient database.
3)		authorization number is faxed or emailed to the admitting facility for their records and on of the authorization. The fax will contain the following information:
	a) Co	nsumer Name
	,	te of Birth
	c) Ad	mission Date
	d) Sta	te Authorization Number
4)	inpatient a provider, f	tracted crisis providers, CRMHS and PeaceHealth will notify The RSN of any involuntary dmission within 24 hours of admission. The Inpatient Data Form will be completed by the faxed to the RSN, and the demographic information for the consumer will then be entered SN inpatient database.
5)	The RSN will be notified by the admitting hospital within 24 hours of discharge of a PHP authorized of ITA consumer.	
6)	The RSN v	will electronically transmit all Inpatient data to the Mental Health Division.
Αţ	oproved by:	Date: Date:
		Clark County Department of Community Services